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TRANSACTIONS

OF THE

EIGHTEENTH ANNUAL MEETING

OF THE

MEDICAL SOCIETY

OF THE

STATE OF NORTH CAROLINA,

HELD AT

RALEIGH, N. C., MAY 1871.

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MINUTES.

The Medical Society of the State of North Carolina convened in the Senate Chamber in this city, to hold its eighteenth annual session, on Tuesday, May 9th, at 12 M. The Society was called to order by its President, Dr. Hugh Kelly, of Statesville.

It having been announced that the Secretary, Dr. T. F. Wood, of Wilmington, was unavoidably detained, on motion of Dr. E. Burke Haywood, Dr. James McKee was appointed Secratary *pro tem.*

The Secretary called the roll, and the following members responded to their names: Drs. W. H. McKee, of Wake Co.; W. G. Hill, Wake; Chas. E. Johnson, Wake; N. J. Pittman, Edgecombe; R. B. Haywood, Wake; E. B. Haywood, Wake; William Little, Wake; W. W. Gaither, Caldwell; F. J. Haywood, Jr., Wake; Jno. S. Leach, Johnston; J. W. Jones, Edgecombe; C. T. Murphy, Sampson; J. F. Shaffner, Forsythe; W. R. Sharpe, Davie; R. L. Payne, Davidson; J. J. Summerell, Rowan; Walter Debnam, Wake. Eugene Grissom, Wake; W. T. Cheatham, Granville.

The President appointed Drs. E. B. Haywood. J. J. Summerell and W. W. Gaither as the Committee on Credentials.

On motion of Dr. Murphy, the reading of the minutes of the proceedings of the last meeting was dispensed with.

President Kelly wished to know if there was any business requiring immediate consideration.

Dr. J. W. Jones, Treasurer, hoped that the Chair would at once appoint a Finance Committee, as there were matters of importance for such committee to consider.

The President then appointed Drs. N. J. Pittman, Eugene Grissom and Jno. S. Leach.

Dr. J. J. Summerell, from the Committee on Credentials, made the following report, which was adopted:

To the Medical Society of the State of North Carolina:

The Committee on Credentials respectfully report that they have examined the credentials of the following gentlemen and recommend that they be admitted to membership in the Society, viz: Dr. Wis. I. Royster, Raleigh, N. C.; Dr. W. A. Fort, Wake County.

E. BURKE HAYWOOD, M. D., *Chairman.*
J. J. SUMMERELL,
W. W. GAITHER.

RALEIGH, N. C., May 9th, 1871.

Drs. Royster and Fort being elected permanent members, signed the Constitution and By-Laws and paid the initiation fee.

Dr. Johnson moved that the annual address be delivered to-morrow evening (Wednesday) at 8 o'clock, in the Commons' Hall, and the public generally be invited to attend.

Dr. Murphy moved to amend by inserting in the invitation the words, "and the ladies especially."

Dr. Johnson accepted the amendment, and the motion as amended was put to a vote and adopted.

Dr. N. J. Pittman, Chairman of Committee on Finance, submitted the following partial report:

We, the Finance Committee, upon an examination of the indebtedness of the Society, beg leave to make a partial report :

1. That the assessment for the ensuing year be $5 00 *per capita.*

2. That further time be granted the committee to report.

N. J. PITTMAN, *Chairman,*
EUGENE GRISSOM,
JNO. S. LEACH.

RALEIGH, N. C., May 9th, 1871.

After some little discussion the report was, on motion of Dr. Murphy, received that it might be discussed. Here quite a lengthy debate arose between Messrs. Pittman, Murphy, Johnson, Payne, W. H. McKee, Jones and others in regard to the general financial condition of the Society and the necessity for the proposed increase of assessment. After quite a lengthy debate the report was, on motion of Dr. Murphy, postponed until to-morrow morning at 10 A. M.

Dr. R. L. Payne, of Davidson, arose to a question of privilege ; stated that in published transactions of last meeting he was reported as having given his consent to have published a paper that he had read before the Society, whereas he did not.

On motion of Dr. Johnson, the Society adjourned until to-morrow at 10 o'clock.

WEDNESDAY, May 10th.

Convention assembled at 10 A. M., the President, Dr. Kelly, in the chair.

Minutes of yesterday read and approved.

The following additional members were ascertained to be present: Drs. Geo. L. Kirby, of Wayne; A. S. Jones, Warren; H. W. Faison, Duplin; W. T. Ennett, New Hanover; W. W. Lane, Wilmington; J. H. Hicks, Duplin; T. M. Rountree, Greene; L. A. Stith, Wilson; Chas. J. O'Hagan, Pitt; W. H. Howerton, Rowan; Gid. H. Macon, Halifax; Geo. A. Foot, Warren; W. A. B. Noreum, Chowan; and Robert J. Hicks, Granville.

Dr. E. Grissom, on the part of the Board of Directors of Insane Asylum, extended an invitation to the members to visit that institution.

On motion of Dr. W. H. McKee, the invitation was accepted for 9 A. M. to-morrow.

The hour for the further discussion of the partial report of the Finance Committee having arrived, Dr. Johnson moved that its further consideration be postponed till the committee should make a full report. Adopted.

Dr. W. H. McKee submitted the following report from the Executive Committee:

To the State Medical Society:

Charges have heretofore been preferred against two of our members, Drs. A. D. Moore and L. A. Stith, of Wilson, N. C., for violation of our Code of Ethics in furnishing a certificate recommending an empirical medicine—Rosadalis. This case has been before the Society for a year or two, and at our last meeting in Wilmington was referred to the Executive Committee, to report upon to this present meeting. I have duly attended to the duty thus imposed upon me and have had interviews and correspondence with said members on said violation. It is due that they should be permitted to speak for themselves, as they have done in the following communication received from them:

WILSON, N. C., May 4th, 1871.

S. S. SATCHWELL,

Chairman Exec. Committee,

N. C. Medical Society:

DEAR SIR: We have the honor to acknowledge the receipt of your communication of the 24th ult., in regard to the charge preferred against us, and in reply, freely acknowledge our error in regard to violation of Section 3, Article VI of the Constitution of the Medical Society of the State of North Carolina. That we regard the act, committed in a *thoughtless moment*, as reprehensible and deserving censure, and as an atonement for our error of the past, our future course shall be characterized by a strict observance of those laws, upon which the welfare, honor and integrity of the profession depend. Hoping that our apology may be satisfactory, we subscribe ourselves,

Very respectfully yours, &c.,

A. D. MOORE.
L. A. STITH.

In regard to the above statement, it is submitted that the acknowledgement and apology it contains should be satisfactory, and that those erring members should be reinstated into full membership and fellowship with the Society and the regular profession. I know them to be gentlemen of character, honor, intelligence and skill, and devoted to the best interests of the profession, and this admission of wrong and assurance of hereafter standing by the established ethics of the profession is no doubt made in good faith.

Respectfully submitted,

S. S. SATCHWELL,
Chairman Executive Committee.

May 8th, 1871.

Dr. Johnson moved that the report be adopted in full and spirit. Prevailed.

The President announced that written or oral communications would be in order:

The Committee on Credentials made the following report:

To the Medical Society of the State of North Carolina:

The committee having examined the credentials of Dr. George Fields, of Warren, respectfully recommend his admission to membership in the Society.

E. B. HAYWOOD, *Chairman.*
W. W. GAITHER,
J. J. SUMMERELL.

May 10th, 1871.

Dr. Gaither moved to amend the report of the Committee on Credentials by adding the name of Dr. C. G. Cox, of Onslow County. Carried.

On motion of Dr. Payne, the report was adopted.

Dr. Robert J. Hicks, of Granville, read a paper presenting a case of *Scleroderma;* also, two cases of *Empyema*, relieved by the operation of Thoracentesis. (Appendix A.)

On motion of Dr. E. Burke Haywood, the paper of Dr. Hicks was referred to the Committee on Publication.

Dr. O'Hagan expressed gratification at hearing the report of Dr. Hicks, and commented at some length on cases of like nature as referred to by Dr. Hicks.

Dr. W. H. McKee spoke of some cases as occurring in his practice.

Dr. W. G. Hill alluded to a case in his practice.

The subject was further discussed by Messrs. Norcum, Sharpe, J. W. Jones and Hicks.

Dr. E. Burke Haywood, from his "Surgical Memoranda," presented two cases: 1s. A case of *Vescio Vaginal Fistula;* 2d. A case of *Traumatic Aneurism of Superficial Palmar Arch.*

On motion of Dr. Norcum, the thanks of the Society were tendered to Dr. E. Burke Haywood for his report, and it was referred to Committee on Publication.

Dr. N. J. Pittman, Chairman of Finance Committee, submitted the following report :

To the Medical Society of North Carolina :

The undersigned, Committee of Finance, having examined the vouchers of the Secretary and Treasurer and the accounts against the Society, beg leave to report that we find the said vouchers correct, and that the Society is indebted to Messrs. Engelhard & Price, of Wilmington, to the amount of five hundred and thirty dollars and eighty-eighty cents, it being the unliquidated accounts for advertising and printing from June 1866, after being credited by the various advancements (properly vouched for) since February 1868.

The assets consist of one hundred and thirteen dollars and fifty cents due from the Secretary, and eighty-eight dollars in the hands of the Treasurer, leaving the present indebtedness three hundred and twenty-nine dollars and thirty-eight cents. In order to accomplish an early settlement of these obligations, it is suggested by the committee that the annual assessments be fixed for the ensuing year at five dollars *per capita.*

All of which is respectfully submitted.

N. J. PITTMAN, *Chairman.*
EUGENE GRISSOM,
JNO. S. LEACH.

May 10th, 1871.

After considerable discussion on the subject, the report of the committee was recommitted.

Dr. Foote offered the following resolutions, which were adopted :

Resolved, That a committee of one (representing this Society) be appointed in each county in the State to collect the arrearages due by delinquent members as early as possible, and to report at the next meeting of this Society; and those failing to pay up their dues be dealt with as the Constitution directs, unless they can satisfy this Society of their present inability.

Resolved, That all moneys collected shall be forwarded to the Treasurer as soon as possible.

The President announced the following Committee on Nominations: Drs. W. H. McKee, J. J. Summerell, Chas. E. Johnson, Chas. J. O'Hagan and R. L. Payne.

On motion the Convention then adjourned to meet at Commons Hall this evening at 8 o'clock, to hear the address of Dr. R. L. Payne, orator.

WEDNESDAY, 8 O'CLOCK, May 10th, 1871.

The Society was called to order by the President, Dr. Hugh Kelly, who then introduced the orator, Dr. R. L. Payne, of Davidson, who arose and entertained the Society and a large and select audience upon "Some of the duties of the worthy physician and some of the obligations due the worthy physician by the community." (Appendix C.)

At its conclusion the President announced the Society adjourned till 9 A. M. to-morrow.

THURSDAY, May 11th, 1871.

The Society assembled at 9 A. M. at the Capitol.

In accordance with an invitation from Dr. Eugene Grissom, Superintendent of Insane Asylum, to visit that institution, carriages being in waiting, the members were soon conveyed to that institution, where a most cordial welcome was extended from the Superintendent, the Assistant Superintendent, Dr. Fuller, and the Steward, James H Moore, Esq. The visit occupied some two or more hours, and during that time the various wards and different departments were visited, everything indicating an earnestness and skill in those concerned in its management. After returning from the Asylum the Society convened in the Senate Chamber at 11:30 A. M. and was called to order by the President Dr. Kelly.

Dr. Norcum laid before the Society a letter from Dr. Jos. Jones, of New Orleans, La., enclosing a communication from Dr. W. A. Sharpey, Secretary of the Royal Society, London, stating that the Royal Society would gladly take advantage of any opportunity to communicate with the several Medical Societies of North America which publish proceedings, and the editors of the principal medical journals with a view of exchanging publications. The communication also contained a circular of a work—"Medical and Surgical Memoirs"—which Dr. Jones is preparing for the press.

On motion of Dr. F. J. Haywood, Jr., the Secretary was instructed to communicate with Dr. Sharpey, of the Royal Society of London, relative to the exchange of published transactions.

Dr. W. T. Cheatham read a report of a violent case of *Cerebral excitement*, following congestion of the brain, relieved by bromide of potassium.

On motion of Dr. Alston, the report was referred to the Committee on Publication.

Dr. Willis Alston read a report of a case of *Glioma Retinae.*

On motion of Dr. J. S. Jones, it was referred to Committee on Publication.

Dr. J. W. Jones gave an account of two similar cases treated successfully by himself.

Dr. Cheatham had seen a similar one in Granville County.

Dr. Norcum moved that all papers for publication should be sent to the Secretary within 30 days.

Dr. Johnson moved to amend by saying 15 days. Carried.

On motion of Dr. Gaither, the vote by which the amendment was adopted was reconsidered.

The vote was again taken on Dr. Johnson's amendment, and it was adopted.

The motion as amended was then adopted.

Dr. Gaither, from Committee on Credentials, submitted the following report:

To the Medical Society of the State of North Carolina:

We have examined the credentials of Dr. G. G. Thomas, of Wilmington, and recommend that he be admitted as a member of this Society.

E. BURKE HAYWOOD, *Chairman.*
W. W. GAITHER,
J. J. SUMMERELL.

Raleigh, N. C., May 11th, 1871.

The report was adopted and Dr. G. G. Thomas came forward and signed the Constitution.

Dr. N. J. Pittman, Chairman of Finance Committee, submitted the following report:

To the Medical Society of North Carolina:

The undersigned, Committee of Finance, having examined the vouchers of the Secretary and Treasurer and the accounts against the Society, beg leave to report that we find the said vouchers correct, and that the Society is indebted to Messrs. Engelhard & Price, of Wilmington, to the amount of five hundred and thirty dollars and eighty-eight cents, it being the unliquidated accounts for advertising and printing from June 1866, after being credited by the various advancements (properly vouched for) since February 1868.

The assets consist of one hundred and thirteen dollars and fifty cents due from the Secretary and eighty-eight dollars now in the hands of the Treasurer, leaving the present indebtedness three hundred and twenty-nine dollars and thirty-eight cents. In order to accomplish an early settlement of these obligations, it is suggested by the Committee that the annual assessment be fixed for the ensuing year at three ($3.00) dollars *per capita*. All of which is respectfully submitted.

N. J. PITTMAN, *Chairman.*
EUGENE GRISSOM,
JNO. S. LEACH.

May 11th, 1871.

On motion of Dr. Sharpe the report was adopted.

Dr. Grissom moved that no member be assessed for arrearages for more than two years.

Dr. Foot opposed the motion and gave several reasons for so doing.

Dr. Macon moved to amend the motion by adding "prior to 1866." Dr. Grissom accepted the amendment.

The motion was then adopted.

Dr. Murphy offered the following resolution:

Resolved, That the thanks of the Society are hereby tendered to Dr. R. L. Payne for his able and interesting address delivered before the Society last evening, and that a copy be requested for publication.

Adopted unanimously.

Dr. Ennett offered the following resolution:

Resolved, That the thanks of the Society are hereby tendered Dr. Eugene Grissom, Superintendent of Insane Asylum, for the kind invitation to visit that Institution, and for the liberal hospitalities extended to them this morning.

The resolution was unanimously adopted.

Dr. Murphy called attention to the report of the Board of Public Charities, and entered into a short explanation of the purposes of the Board and its beneficent operations.

Dr. W. H. McKee, from Committee on Nominations, submitted the following report:

To the Medical Society of the State of N. C.:

The Committee on Nominations submit the following report and recommend its adoption:

For President:

Dr. William G. Hill, Raleigh, N. C.

Vice-Presidents:

1st. Dr. H. W. Faison, Duplin;
2d. " R. J. Hicks, Granville;
3d. " Gid. H. Macon, Halifax;
4th. " W. A. B. Norcum, Chowan.

Treasurer:

Dr. J. W. Jones, Tarborough.

Secretary:

Dr. James McKee, Raleigh.

Orator:

Dr. Geo. A. Foot, Warrenton.

Delegates to American Medical Association:

Dr. W. A. B. Norcum, Edenton;
" J. T. Shaffner, Salem;
" S. S. Satchwell, New Hanover;
" M. Whitehead, Salisbury;
" R. L. Payne, Lexington.

Executive Committee:

Dr. W. G. Thomas, Wilminton;
" N. J. Pittman, Tarborough;
" W. R. Sharpe, Fulton, Davie Co.;
" F. N. Luckey, Rowan Co.

Committee on Publication:

Dr. Chas. E. Johnson, Raleigh;
" E. Burke Haywood, "
" W. H. McKee "

W. H. McKEE, *Chairman.*
CHAS. E. JOHNSON,
R. L. PAYNE,
J. J. SUMMERELL,
CHAS. JAS. O'HAGAN.

Raleigh, May 11th, 1871.

On motion of Dr. Grissom, the report was adopted and the nominations were concurred in.

Dr. O'Hagan offered the following resolution:

Resolved, That in consideration of the absence of Dr. W. W. Gaither from the State since 1865, his dues are remitted upon payment of those accruing since his return to the State in 1870.

Dr. Hill moved to amend by adding, "and that he be continued an honorary member of the Society."

Dr. O'Hagan accepted the amendment and the resolution as amended was adopted.

Dr. Foot read the following communication and moved its acceptance:

Mr. President and Gentlemen of the Medical Society of North Carolina:

I hereby respectfully tender my resignation as member of your honorable body and request its acceptance.

R. E. WILLIAMS.

WARRENTON, N. C., May 6, 1871.

The resignation was accepted.

On motion of Dr. Murphy the place and time of holding the next meeting of the Society was considered.

Dr. Murphy placed Morganton in nomination as the place of the next meeting.

Dr. Johnson urged that the meetings should take place in this city and that they should be held here permanently. He proceeded to give several reasons why he urged this policy, and moved that the future meetings of the Society

should be held in this city at such time as the Society should determine upon.

Dr. Foot opposed the motion and objected to localizing the meetings of the Society. He thought the present migratory plan operated beneficially.

Dr. Faison thought the migratory system should be continued for a year or two longer, at least; it would then do to localize the meetings.

Dr. E. Burke Haywood concurred with Dr. Johnson.

After quite a lengthy debate, which was participated in by a number of gentlemen, the motion fixing Morganton as the next place of meeting was put to a vote and adopted.

Dr. Foote said he had voted with the majority under a misapprehension. He would move to reconsider the vote.

The motion to reconsider was adopted.

Dr. Duffey nominated New Berne as the next place of meeting.

As some constitutional objections were raised to Dr. Johnson's proposition to localizing the meetings, the question was passed over for the present, and, on motion of Dr. E. Burke Haywood, a ballot was taken, Raleigh, Morganton and New Berne being in nomination. Drs. Grissom and Sharpe were appointed tellers. The vote resulted: Morganton 11; New Berne 13; Raleigh 9.

On motion of Dr. Shaffner, the nomination of New Berne was made unanimous.

On motion of Dr. F. J. Haywood, Jr., the Society adjourned till 5 o'clock P. M.

AFTERNOON SESSION.

THURSDAY, May 11th, 1871.

At 5 o'clock the Society was called to order by its President, Dr. Kelly.

On motion of Dr. Shaffner, it was agreed that when the Society adjourned it adjourn to meet at New Berne the 3d Tuesday in May 1872.

Dr. Norcum offered the following resolution, which was unanimously adopted:

Resolved, That our thanks be tendered the citizens of Raleigh, especially the medical profession, for the courtesies extended to us, and to the railroad and steamboat companies for passing delegates at half fare.

The Chair announced Drs. Faison, Murphy and W. G. Thomas as the Committee on Obituaries.

Dr. Norcum exhibited a number of photo-micrographs from the Surgeon-General's Office, War Department, illustrating the histology of the minute blood vessels, muscles, &c., by Dr. J. J. Woodward, one of the most distinguished microscopists in this country.

In the absence of Dr. W. G. Hill, the President elect, who was detained by the sickness of a member of his family, the first Vice-President, Dr. H. W. Faison, of Duplin, was called to the chair.

Dr. Kelly, the retiring President, then delivered a brief valedictory address.

Dr. Shaffner offered a resolution of thanks to the retiring

President and other retiring officers of the Society. It was unanimously adopted.

Dr. Murphy offered a resolution of thanks to P. McGowan, Keeper of the Capitol, for his polite attention, &c.

On motion of Dr. R. B. Haywood, the Committee on Obituaries were allowed further time in which to make a report.

On motion of Dr. E. Burke Haywood, the Society adjourned to meet in New Berne, on the 3d Tuesday in May, 1872.

APPENDIX.

[APPENDIX A.]

REPORT OF A CASE OF SCLERODERMA AND TWO OF EMPYEMA.

BY ROBERT J. HICKS, M. D.

The case of Scleroderma occurred in a negro female about 35 years of age, by occupation a field laborer. Her health had been good up to the commencement of this disease, which was early in September, 1870. The first symptoms were a prickling or tingling sensation in the feet and hands. A short time afterwards, not definitely ascertained, induration of the subcutaneous tissues gradually developed itself, producing awkwardness of motion and difficulty in flexing the arms and legs—together with some stiffness of facial tissues. These singular symptoms exciting apprehension on the part of her employer, once her owner, with the benevolence that generally characterizes that class of men towards their former slaves, he employed medical aid at his own expense. She was treated for rheumatism and the various customary remedies were tried, but with no good result. In spite of every means used, the disease progressed regularly and rapidly up to the time when seen by me, which was in February, 1871, and three days only before her death. Upon sight I was particularly impressed with the singularly inanimate and expressionless countenance of the patient. Examination showed the most marked sclerema of the tissues of the breast, face, legs and arms, from the extremities to above the knees and to the shoulders. The natural depressions, and plaits of the face were completely obliterated and the muscles of the jaws were so stiff and their action so much

impaired as to seriously interfere with the functions of speech and mastication. Menstruation ceased about one month after the commencement of the attack, but digestion and the action of the bowels preserved their normal condition, and though the temperature of the parts affected was perceptibly lowered, there was no loss of sensibility and no disposition to pit under pressure, but the parts felt as hard as a bone.

Three days after my visit the patient died, and to my regret no opportunity was given for making a post-mortem examination.

There are recorded, I think, about forty cases of this curious disease, and all of these ended fatally under various, but simply empirical treatment. Being so well satisfied of the hopelessness of this one, nothing was attempted.

The etiology of this disease seems to be altogether uncertain. Some have supposed it connected with sudden exposure to cold and the stoppage of the natural secretions. Others suppose that it partakes something of the nature of Elephantiasis Arabum and that it developes after the same manner, by infiltrating the tissues and the formation of exudation corpuscles, followed by connective tissue and the subsequent removal of the fluids by absorption. This disease is so rare that though described minutely to several intelligent medical men, not one was prepared to apply to it the proper name.

[NOTE.—Since writing the above article I have had an opportunity of seeing a case of Sleroderma in process of recovery. It was in the person of Dr. Bruce, of South Carolina. He promises to give a minute history of his case to medical journals at some future time. At the present time (May 13th) there is a small indurated spot upon the biceps muscle, about one and a half by two inches in size. He states that the greater portion of his body had been diseased; that he tried almost every remedy that could be suggested or recommended by his physicians, but with total failure. They generally aggravated the symptoms. Finally, when in utter despair, opportunity was given him of testing a singular treatment called Bauncheitidmus, after its discoverer, Dr. Bauncheited, of Berlin,

which consisted in the application of an oil extracted from the red ant and the nettle weed, the efficient principle of which is formic acid, to the different parts affected with Sclerœmia. An instrument is used containing twenty-four needles, which are driven by a spring through a piece of flannel, very slightly saturated with this oil, into the epidermis—each needle carrying a minute portion of the oil with it. The effect is excessive cutaneous excitement and copious diaphoresis. Three applications placed the Doctor in a state of rapid convalescence.

TWO CASES OF EMPYEMA CURED BY PARACENTESIS.

One was a young man about 25 years of age, who discharged accidentally the contents of a gun into the thoracic cavity. The point of entrance was about the sixth or seventh rib near the sternum. The point of exit was about midway between the sternum and spine, in the axillary or lateral region, between the fourth and fifth ribs. The contents seem not to have injured the lungs, but passed some distance between them and the costal pleura. Both points of entrance and exit healed up readily, but left the patient in a condition resembling one in the last stage of Tuberculosis—with quick and labored respiration, rapid pulse, hectic, emaciation and great debility.

Continuing in this condition until greatly alarmed, I was called to see him and found him with no abatement of the above symptoms, and with the addition of a very small fistulous opening close to the point of exit, from which exuded now and then a drop of pus. The fistula was tortuous and ran along the rib for an inch. It was a matter not easily determined whether the trouble proceeded from a carious condition of the internal surface of the rib, which, however, was decided by the operation, which consisted in enlarging and making more direct the existing outlet. Through this a medium-sized catheter was introduced and two pints of pus, at the least, evacuated. This afforded him the greatest relief. But within two weeks it had re-accumulated to an equal extent and required a second evacua-

tion. It became necessary to repeat the operation a third time, with a similar result. Being reluctant to inject irritants into the pleural cavity, I furnished the patient with a large size gum elastic catheter, with directions to introduce it daily and keep the sac empty. The formation of pus diminished daily, and within a few weeks ceased altogether. Adhesion was complete and the young man advanced to recovery steadily but slowly. No constitutional treatment was used except that of stimulants and a generous diet. His system was so shattered by neglect of surgical treatment, the only means of recovery, that it required six months for a complete restoration of health and strength.

The second case was that of an interesting little girl, seven years of age, the daughter of Dr. W., of this county. It was the result of an acute attack of Pleuritis of the left side, brought on by sudden exposure to cold, by leaving heated cars to take a trip home on a cold day. This attack was met in the usual way, no blood letting of any kind being used, and I think no antimony. But not recovering in the usual time, Dr. W. found the cause to be the existence of effusion within the pleural cavity. To confirm his opinion and to relieve him from the necessity of operating, which parental sympathy and anxiety only forbade, my aid was asked. The little patient had now been sick about one month and presented the unmistakable signs of empyema, The intercostal spaces were full and bulging, and the left side was larger by half an inch than the right or sound side, Percussion showed perfect flatness from the fourth rib to the base of the lung. Respiratory murmurs were totally absent over this whole region, while auscultation revealed puerile respiration throughout the sound lung—it being put upon double duty. She had well marked rise of fever once and sometimes twice daily. The respirations were about 40 and the pulse from 120 to 140 to the minute, At night she slept well, but was greatly troubled with copious perspirations.

It was evident that paracentesis was the remedy, But on this visit she was so nervous, apprehensive and excited, being unusually sprightly, that the operation was postponed for a short period. In the meantime wine and tonics were advised and careful watching, as her condition was precarious. Within a few days the accumulation produced a slight protuberance between the fifth and sixth ribs, about two inches from and behind the nipple. At this point a curvilinear incision was made through the skin, about three-fourths of an inch long, and a small size trochar pushed into the pleural sac. It was withdrawn and a female silver catheter was introduced, through which one-half a pint of pus escaped. The pus was very thick and was evacuated with difficulty. The outlet was intended to be temporarily closed with adhesive plaster, but, contrary to our desire, healed by first intention. Under wine and a generous diet all the unpleasant symptoms which had existed previous to the operation now disappeared as if by magic. But to our disappointment they returned as suddenly in ten days, when examination discovered a second accumulation of pus within the thorax. The tendency to escape at the same point was now so decided that a slight incision through the epidermis, by Dr. Wilson, permitted the escape of the pus in a stream. The previous quantity of pus was again evacuated. Not being able to be present on this occasion, upon my return on the following day, in consultation with Dr. W. R. W. and his father, a medical man of reputation, the important question for decision was, how to prevent the re-accumulation of this pus in the pleural sac. Those who have had no cause to look into this subject will be surprised to find in what an unsatisfactory manner authority responds to this important question. Different authorities were consulted and the propriety of injecting various stimulating articles into the pleural sac was discussed; but remembering the good results of the plan pursued in the case just related, the same was advised and adopted in this. It was therefore

resolved to keep the aperture from healing and the pus from accumulating by the daily introduction of the catheter previously used, and the best instrument belonging to our limited supply.

Under this treatment the quantity of pus evacuated was less and less every day, until about the eighth after its commencement, when nothing escaped but a little bloody serum—on the ninth nothing escaping, the aperture was allowed to heal. Recovery was now thought to be secure, but two days afterwards I was called in haste to see her, her condition exciting the greatest anxiety on the part of the parents. She had high fever, severe cough, an exceedingly anxious expression of countenance, quick pulse, difficult but feeble respiration. Auscultation revealed almost imperceptible respiratory murmurs, not only in the unsound, but also sound lung. What internal mischief could account for all this constitutional disturbance? Was there hepatization, effusion or emphysema? The natural condition of the intercostal spaces and the absence of flatness upon the previously diseased side informed us to infer that there was no effusion. There was no flatness upon percussion upon the right or sound side, but perfect resonance. There was, therefore, neither effusion nor solidification there. The symptoms therefore seemed to point to emphysema of the right lung, in which the natural murmurs had been so much exaggerated during the existence of effusion in the left. Six hours decided these questions and cleared up the difficulty by showing that all these alarming symptoms resulted from accumulations of thickened mucus in the bronchiae, below the bifurcation, The treatment being based upon this suspicion, an expectorant, I now forget what, was administered, which caused the expulsion of the obstruction from the left lung, and some hour or two afterwards from the right. All the above symptoms immediately vanished and upon the success of these efforts the little patient advanced steadily on to perfect convalescence.

I have thus minutely described these last unpleasant symptoms in the little patient to show what an alarming condition a simple catarrh may cause when supervening upon a previously diseased lung—similating a tempest in a teapot—and to show how beautifully the troubles of diagnosis are dissipated by the scientific methods of auscultation and percussion, This kind of bronchial obstruction is not unfrequent in the catarrh of children and may be promptly relieved by the administration of an emetic.

In performing these two operations but little effort was made to prevent the entrance of air into the pleural cavity. Several times it was heard to enter with an audible hiss, This, however, was not intentional, although I had no apprehension of trouble from it, which the result showed to be well founded. Perhaps there might result some unpleasant symptoms provided the effusion was serous and not purulent. For the conversion of serum into pus is all that this bugbear could accomplish. While upon this point I may simply add that during the late war for Southern Independence, on more than one occasion, I remember to have seen men shot through the parenchyma of the lungs, who at each respiration would inspire and expire bubbles of air in bloody froth, at the points of both entrance and exit, but who, nevertheless, upon closing the apertures, went on to recovery without a bad symptom.

My object in reporting these cases is to illustrate two facts—first, that the entrance of air into the pleural sac in operating for empyema is harmless; and in the second place, that the injection of irritating fluids into the cavity is unnecessary, if not attended with danger. The patient recovers from empyema just as one recovers from an ordinary abscess, which none would think of injecting with irritants. Empty the sac and keep it empty, and it will gradually heal, closing from the periphery to the aperture as a central point, until by adhesion the whole sac is obliterated. Such was the manner of healing in the above cases, as was proved by

actual experiment. Mankind are too prone to under estimate Nature's capacity. Medicine is but her handmaid Her most important duty is to remove the obstructions and Nature will be equal to her task in the vast majority of instances.

[APPENDIX B.]

OPERATION FOR TRAUMATIC ANEURISM OF THE SUPERFICIAL PALMER ARCH.

BY E. BURKE HAYWOOD, M. D., RALEIGH, N. C.

August 2d, 1870, I was called to see Mrs. J. B., who had two weeks before wounded the upper external half of her left hand, by the breaking of the glass handle of a lamp, whose top she was endeavoring to unscrew. She reports that the wound was followed immediately by copious arterial hemorrhage. It was arrested, temporarily, by her attending physician, by styptics and compression, but returned several times, at short intervals, until she was rendered anemic and very nervous by the frequent and large losses of blood. Upon examination I found traumatic aneurism of the superficial palmer arch. The walls were thin and it pulsated violently. Fearing a speedy return of the hemorrhage, I determined on an immediate operation. Assisted by Drs. Little and F. J. Haywood, Jr., we proceeded to ligate the artery above and below the wound. She was etherized by Dr. F. J. Haywood, Jr. After applying the tourniquet to the brachial artery, I proceeded to make a free incision in the line of the wound, cutting through the aneurismal sac and turning out the clots. The walls of the sac and the artery close to it were so soft as to tear when seized by the forceps, and were cut through by the ligature. Under these

circumstances I extended the incision and we tied the ulnar artery in the wrist. We waited nearly an hour for hemorrhage from the distal end of the wounded artery. None taking place, and being unable to find the artery in the altered condition of the parts, caused by previous extravasation and inflammation, we determined to close the wound, supposing that the distal end of the artery had been closed by a clot, which the current of blood through the collateral circulation was too feeble to remove. The result of the case proved such to be the fact, as there was no return of hemorrhage, and she got well without a bad symptom. In wounds of the arteries of the hand, to use the words of the distinguished Professor Gross, "It is great folly, nay, it is positively worse than folly, to tamper with the comfort and welfare of the patient by the use of compression, either direct or indirect—only precious time is wasted, the bleeding will return whenever the mechanical support is taken off."

CRANIOTOMY AND OPERATION FOR VESICO-VAGINAL FISTULA.

BY E. BURKE HAYWOOD, M. D., RALEIGH, N. C.

Sunday, February 19th, about 3 o'clock A. M, I was requested by Dr. F. J. Haywood, Jr., to visit with him Mrs. Margaret Murray, who had been in labor since Friday the 17th inst., about 3 o'clock A. M. She had been under the care of an ignorant midwife until 6 o'clock P. M. Saturday, at which time she was seen by Dr. F. J. Haywood, Sr. He remained with her until 3 o'clock A. M. when he was compelled by sickness to leave the case. When we saw Mrs. Murray, she was suffering from nausea, her pains had ceased for some hours and she was very anxious to be relieved by instrumental aid. Upon inquiry, we were in-

formed that she was thirty-four years old and that this was her fourth labor. Her three previous ones had been very tedious and difficult. She had also suffered during the last three months of this pregnancy with pain in the region of the bladder and bloody urine. Upon examination we found the vulva very much swollen and hot, the urethra congested and swollen, the os-uteri fully dilated, the foetal head with a large caput succedaneum, which prevented an accurate diagnosis of the position. The head was impacted and immovable by considerable force. Upon leaving home, I had brought my Hodges' forceps and vectis, as I was informed that the case would be an instrumental one.

Upon consultation we determined to attempt delivery by the forceps. Chloroform was administered by Dr. F. J. Haywood, Jr. She rapidly came under its influence. I then made several attempts to apply the forceps but could not succeed. I then tried to alter the position of the head by the vectis, but failed. Dr. F. J. Haywood, Jr., also tried to apply the forceps, but did not succeed. I then requested him to go after his Elliot's forceps, which are smaller and thinner in the blade than Hodges. We then attempted to apply these, but could not pass them beyond the plane of impaction.

Having failed with the vectis and forceps, we determined to resort to "the dire, terrible, destructive and heart-rending operation of craniotomy," as Ramsbotham designates it, and thus, in all probability, to save the mother's life and almost the certainty of her person from the dreadful lesions of sloughing and laceration, which would render her future existence a scene of wretchedness. Having selected from Dr. F. J. Haywood's, Jr., case Blot's perforator, I guarded the point with my fingers and applied it to the most dependent portion of the foetal head, and by a rapid, rotating movement, soon succeeded in perforating the cranium. I then incised the integuments and bones for about an inch, then altered the position of the perforator so as to make an

incision at right angles to the first one. I then plunged the perforator to the base of the cranium and moved it about so as to destroy the structures there, as organic life seems mainly to depend on their integrity, thus preventing the horrid accident of the child breathing and crying after the brain had been partially extracted. Upon withdrawing the perforator, I was very much gratified by no flow or jet of blood following it, but only a small number of clots of blood mixed with cerebral matter, which relieved me entirely of the fear that the child might have been living at the time of using the perforator. The cranial bones and cerebral mass having been well broken up, I endeavored to make extraction by the crotchet; finding this tedious, upon the suggestion of Dr. F. J. Haywood, Jr., I used his Simpson's cranioclast. This admirable instrument takes such a tenacious hold upon the integuments and bones as to give a powerful means of leverage and extraction. Soon after its application large quantities of cerebral substance were discharged, and the head was dragged down from its place of impaction. I then desisted from my efforts at extraction and gave her a fluid drachm of Squibbs' extract of Ergot, and used external graspings and rubbings of the uterus for nearly half an hour, in hopes of bringing on contractions and thus avoid the danger of emptying an atonic uterus. Slight contractions taking place, I delivered the mutilated head, and after waiting a short time, the shoulders, by means of the blunt hook. There was no hemorrhage of consequence. We then waited for half an hour for the expulsion of the placenta, which not taking place, I introduced my left hand into the uterus, and grasping it with the right hand, succeeded in bringing on good contractions and delivered the placenta. It was followed by very little hemorrhage.

Upon examination of the cranium after its expulsion, I found that the perforator had entered just anterior to the left parietal protuberance, which induced me to believe that the mal-position had been that of the side of the head.

Upon examination, after delivery, of the superior strait, I found what I believed to be a short conjugate diameter.

Mrs. Murray rallied very well from her long and difficult labor, and if she does not have vesico-vaginal fistula from the long continued pressure and impaction of the foetal head, will do well.

We visited Mrs. Murray three times a day after her labor, for the purpose of introducing the catheter, she suffering from paralysis of the bladder. On the eight day from the termination of her labor, she discovered slight urinary discharge from her vagina, which continued to increase in quantity until the fifteenth day, when a large slough separated from the anterior wall of the vagina. The case being now clearly one of vesico-vaginal fistula, we determined to prepare her system for an operation.

On the 4th of April, in company with Drs. Chas. E. Johnson, F. J. Haywood, Jr., and Will. Little, I again made a careful examination of the uterus and vagina by Sims' speculum. The other gentlemen present did the same. We found a large vesico-vaginal fistula, measuring one inch and five-eighths (1 5-8) in length and over half an inch in breadth, extending from near the os-uteri downwards, through which opening there was a prolapsus of the internal surface of the bladder as large as half a hen's egg. At the left extremity of this fistula the orifice of the left ureter was plainly visible, through which the urine was discharged in jets.

Upon consultation I determined to perform Sims' operation for vesico-vaginal fistula. Ether was administered by Dr. F. J. Haywood, Jr., but had to be discontinued on account of the vomiting produced by it. I proceeded to perform the operation after the method described by Sims and recommended by Thomas in his work on the Diseases of Women. I found the operation very difficult and tedious, owing to the extent of the fistula and the difficulty of passing the silver-wire sutures through the edges of the right extremity of the fistula. I was very much embarrassed by

the want of a proper needle forceps, the one in my vesico-vaginal case not grasping the needle tightly. Immediately after the operation I introduced one of Sims' sigmoid catheters. Mrs. Murray unfortunately displaced this catheter the night after the operation, remaining several hours without a catheter in her bladder. On the third day after the operation she had a bloody discharge from the vagina, which continued two (2) days. This she supposed to be menstrual. This also complicated her case and prevented the entire healing of the fistula. Finding that the operation had not succeeded, I determined to wait until after her next menstrual period, and then operate soon after its cessation. Waiting until the 20th of May and no menstruation occurring, I determined to operate again.

May 22d. In consultation with Drs. Chas. E. Johnson, F. J. Haywood, Jr., and Will. Little, we made a careful examination of the uterus and vagina, and found that the first operation had nearly succeeded. There being now but two small fistulous openings, one of these barely admitting of the extremity of Simpson's uterine sound and the other of the extremity of a common pocket case probe, both of them situated near the centre of the former large fistulous opening. Considering the size of the original fistula, this result was very encouraging.

A remarkable feature in this case now presented itself. This was the entire absence of any os-uteri, the cervix uteri and vagina being on the same plane, as if the os-uteri had sloughed off. Did not this sloughing take place when she supposed she was menstruating?

I now again performed Sims' operation for vesico-vaginal fistula, during which I tried three different kinds of instruments, belonging to Dr. F. J. Haywood, Jr., for passing the silver-wire sutures, viz: Roux's needle forceps and two curved conulated needles, Stohlmann's and Startin's. I found the use of all of them difficult, having to operate as

it were in a hollow behind the os-pubis. Of the three, I much prefer Startin's for this operation. After the first operation I used Sims' sigmoid catheter, which was displaced several times by the patient. After this one, I syringed out the bladder with tepid water and introduced one of Holt's vulcanized rubber winged catheters, belonging to Dr. Johnson, which has been retained very well.

July 1st. This operation also failed in closing the larger of the small fistulæ, Mrs. Murray and myself being disappointed by the result. The weather being very hot, rendering confinement to bed very irksome, we determined to postpone any further proceedings in her case. The best authorities state that several operations are frequently necessary, in the same case of vesico-vaginal fistula, before success is obtained.

It affords me pleasure to acknowledge the valuable assistance given me in this case by Drs. Johnson, F. J. Haywood, Jr., and Will. Little.

[APPENDIX C.]

ADDRESS OF DR. R. L. PAYNE.

Mr. President, and Gentlemen of the Medical Society:

By an act of charity and great partiality on your part, I have the honor to appear before you to-night to deliver the annual address of our Society. My medical library, the scalpel, the catlin and the pillbox have been the companions of my lifetime, and I make no pretensions to oratory or eloquence, being simply a devout worshipper at the shrine of Æsculapius—therefore I hesitate and shrink from the duty assigned me, more especially when I remember, that after the many elegant and erudite addresses to which we have heretofore listened, my remarks must, of necessity, appear stale and common-place.

But I make the effort as an evidence that I appreciate, and am thankful for, the honor conferred upon me by yourselves, and I throw myself upon your charity, I give myself up to your compassion, trusting that so select, so refined and so inteligent an audience, are not disposed to criticize too severely, but are merciful since you all know that

> "The greatest attribute of Heaven is mercy,
> And 'tis the crown of justice, and the glory,
> Where it may *kill* with *right* to *save with pity.*"

From the sciences of Chemistry, Physiology and Pathology we might select subjects suitable for an occasion like this. The Materia Medica, with its grand collection of trees, plants, flowers, stones, waters and vapors of medicinal virtue, offers an extensive field from which we might gather matter of merit and of interest. In Anatomy we might discourse upon man himself—that wonderful "harp of a thousand strings"—which is only kept in tune so long by the hand of the Great Physician, or we might even venture upon the unexplored regions of Psychology, and make conjectures in

regard to man's immortal part—the soul, its beginning, its essence and its eternal destinies.

But our purpose to-night is not to charm you by any flourish of rhetoric or demonstration of great learning, nor do we hope to fascinate and fix your attention by any scintillations of wit or coruscations of genius, for such is not our forte or province, and should we essay such an effort, like Lucifer, we should fall to rise no more.

But we shall attempt to speak only the "words of truth and soberness, a plain unvarnished tale" so evident, that the "wayfaring man, though a fool, need not err therein," and we respectfully ask your attention. Our subject is

SOME OF THE DUTIES OF THE WORTHY PHYSICIAN, AND SOME OF THE OBLIGATIONS DUE THE WORTHY PHYSICIAN BY THE COMMUNITY.

In order to attain the highest mark of success and greatest amount of usefulness, it is a duty of the first importance to the physician to see that his mental house is founded upon a rock and not upon the sand, so that when "the rains descend, and the floods come, and the winds blow and beat upon that house, it shall not fall, because it is founded upon a rock."

We believe it a duty of paramount importance to every one who enters upon the great responsibilities of our profession, to secure as far as possible a sure foundation, and we believe that the very first steps for attaining this end are a thorough classical and scientific medical education, which can be acquired in the schools, colleges and medical colleges of these United States. Yet a man will not lose anything by going to Europe, even though he be ignorant of the languages there spoken, for the odor of physicians (unlike that of Shakspeare's rose) is very much affected by a name, and men of very small caliber sometimes ride into notice by a trip to Europe, though a thimble would more than suffice

to measure their medical knowledge; however, if you have money and want to see the elephant, go to Europe, and if you do not learn more than you can here, you may possibly learn as much. In this country or in the old, we care not where, your first duty is to secure a thorough education in our profession, as a point from which to start, a foundation upon which to build, and then your duty is to be a student all your days, to be content to trim the midnight lamp and apply yourself assiduously, so that you may keep pace with medical progress and discovery, for the responsibilities which rest upon physicians are binding, not only for time, but also for eternity, and the issues in our hands are those of life and death.

We do not say that a man cannot attain to a very great success and become a very useful citizen without the advantages of an education, but we do say that the same man who becomes eminent in his profession without education, would rise to greater usefulness and distinction with this advantage, because education furnishes the only firm foundation for a noble superstructure; education supplies the magical key which unlocks the storehouse of the mind and is the sure and steady lamp which lights us upon the thorny paths which lead to glory and renown.

It is true that any man who gets upon a horse, with a pair of saddle-bags, and proclaims himself a doctor, can do a practice, so credulous are the people of this good old State! It is true that the success even of the merest charlatan and mountebank often astonishes us by its suddenness, its vividness and its great extent, but such a farce does not and cannot last, because the sure foundation of which we speak is wanting. It is like the passing meteor which startles us by its bright and flashing course across the heavens, but is as suddenly gone, without leaving so much as a track to remind us of its brilliancy, or as the phosphorescent gleam which hovers for a brief space over some putrefying sub-

stance is dispelled by the rays of the sun, so the mushroom fame of the pretender is dispelled and scattered by the noonday sun of reason and intelligence, is lost and forgotten.

Next to a thorough education, it is the duty of every physician to be a man of *unblemished* honor and unflinching integrity. He should be as firm and unyielding in his moral character as the rock of Gibraltar is firm and fixed in its mighty bed, since the trials, the vexations and the temptations, both of mind and body, are greater in our profession, perhaps, than in any other, and he must learn to resist with a face of flint and a "*mens conscia sibi recti*," or he must fail of the highest mark.

He must be ambitious, energetic, persevering, and must cultivate that civility, that pleasantness of address, that "*suaviter in modo*" which will make him an agreeable companion for young and old, high and low, rich and poor.

He must be a careful and attentive listener, and must be ever ready to sympathize with suffering humanity, either in the stately halls of affluence or in the lowly hovels of poverty, and he must be always prompt and punctual in rendering professional aid to all who require his services.

He must have the resolution, too, to contend with and overcome diffculties.

There is a very bitter lesson which all of us must learn, sooner or later, in our progress through life. In the effort to discharge our obligations faithfully we will, of necessity, meet with opposition, and will make enemies who will be ever on the alert to do us an injury. The hideous monster envy will wag her venomous tongue against us; the green-eyed reptile jealousy will fold her deadly coils around our fair name, and slander, the meanest, most monstrous monster of all the hydra-headed race, will hiss out her poisonous breath in our pathway in order to destroy her victim, as the exhalations which fall from the deadly Upas tree destroys the man who tarries beneath its pestilential shades.

But these things should not discourage us. The Bible itself says, "Woe be unto you when all men shall speak well of you." We must expect to have enemies—the man who has none is not worth much, but is one of those easy, mushy, soft, nondescript creations, which, though he resembles man, does not come up to the full standard of true manhood; therefore let us pay no attention to these things, but go forward with a will in the discharge of our duties, remembering that the path of duty (though it be ever so rugged) is the path of safety, and we will eventually reach an exalted eminence from which we can look down upon and laugh all our enemies to scorn.

And gentlemen, we regard it not only as a pleasure, but an absolute duty to secure the good-will and God-speed you of the ladies, because woman's influence is more potent than all other influences combined.

In the days that are gone, upon a dark and stormy night, Leander swam the Hellespont to meet his dark-eyed Hero, and the indirect cause of the fall of Troy was Helen's matchless beauty. Antony died a suicide for Cleopatra's sake, and even in the days of mother Eve, man was passive in her hands and was moulded to her will. In these modern days we are her servants still; we acknowledge her power; we bow before her sceptre of love, of purity and beauty, and we might just as well attempt to wade the Atlantic Ocean or stifle and hold back the flames of Vesuvius with a wet blanket, as to think to succeed in life without the good will of the ladies.

'Tis true, woman is not formed either physically or mentally for enduring the arduous labors and rough work of outdoor life—her mind was not made to rule, else she would not be the lovely, dependent being she is; her arm was not made to use the sword or axe; in fact, all of her physical, as well as mental developements demonstrate conclusively that she was never made to wield the blood-stained sword in times of war,

or to sway the scepter of power and command in times of peace; nevertheless, her influence, beginning with our beginning and ending with our end, is all powerful throughout the whole of our lives. Home and the social circle constitute the arena marked out for her by an all-wise Providence, where impressions are made upon us which are commensurate with eternity itself. Yes, home is the stage upon which she was made to act; home is the sacred temple of her heart's love in which her many virtues shine forth in all their *truest, noblest, most resplendent* beauty. Here we are first nurtured upon the bosom of her love, rocked in the arms of her affection, soothed by her gentle lullabies, and here, as our little bodies gain strength and our untutored minds gain vigor, she points our wandering thoughts to that bright world beyond the grave, teaches us first to lisp the name of Him who formed us, and implants within our tender breasts the germs of those tender principles, which, if properly cultivated in after years, will most assuredly ripen into the joys and delights of Heaven.

Then be sure to secure the influence of the *true women* of this land. May God forever bless and prosper them, and may He forever deliver us from the strong-minded women's-rights women of this age, who are striking fatal blows at, and are fast undermining the beautiful citadel of woman's *modesty* and *purity!* Gentlemen excuse this digression.

The essential elements of all greatness are ambition, energy of action, perseverance of purpose and honesty of intention.

Armed with ambition, energy, perseverance, education and honesty, our panoply is complete, and we need not fear to contend with any man or with all men Ambition is the finger-board which points to the temple of fame, or is rather the "*vis et animus*" which excites us to action. Energy is the will with which we work, with which we resolve to conquer or die in the great battle of life. Perseverance is

the dogged resolution never to intermit our efforts, never to yield a point which is right, until the end in view, the great object of our lives is won. Education furnishes the means for operating, and honesty is the salt which saves us, which purifies, ennobles and renders us truly great. Pope spoke truly when he said "An honest man 's the noblest work of God," and verily, no man can be an honest man without being at the same time a good man, for no man is truly honest, who is not first honest to the instincts of his own immortal soul.

At all times and under all circumstances let our motto be Excelsior, and let our watchword ever be upward and onward. 'Tis said that no sooner has the young eaglet escaped from the shell which confined him, than his bright eyes are fixed upon the sun, and no sooner has he gained a full-fledged coating and vigorous strength, than with his eyes still fixed upon the sun, with his wings outstretched and poised, he mounts upward and onward, circling upward and onward, still upward and onward, 'till lost to human sight; his home. his proper sphere, his chosen element is above the clouds, and he never rests 'till he gains it.

Like the young eagle, let us fix our eyes upon the goal of our desires, and recollect that there are no difficulties which cannot be surmounted, no ends which cannot be accomplished. The topmost round in the ladder of fame can be gained! The highest pinnacle in fame's proud temple can be attained!

The most formidable obstacle in life can be overcome, and every man who uses the means, can find an *object* to live for; can become great, good and noble, and can *command* the respect of the world!

"Tell me not in mournful numbers,
Life is but an empty dream,
For the soul is dead that slumbers,
And things are not what they seem.

Life is real! Life is earnest!
And the grave is not its goal;
Dust thou art, to dust returnest,
Was not written of the soul.

Not enjoyment, and not sorrow,
Is our destined end and way,
But to act, that each to-morrow
Find us further than to-day.

Art is long and time is fleeting,
And our hearts, though stout and brave,
Still, like muffled drums, are beating
Funeral marches to the grave.

In the world's broad field of battle,
In the bivouac of life,
Be not like dumb driven cattle!
Be a hero in the strife!

Trust not future, howe'er pleasant!
Let the dead past bury its dead!
Act! act in the living present,
Heart within and God o'er head.

Lives of great men all remind us,
We can make our lives sublime,
And, departing, leave behind us,
Footprints in the sands of time.

Footprints that, perhaps another,
Sailing o'er life's solemn main,
A forlorn and shipwrecked brother,
Seeing, shall take heart again.

Let us then be up and doing,
With a heart for any fate;
Still achieving, still pursuing,
Learn to labor and to wait."

Then, fellow-members of the Medical Society, let us endeavor always, and under all circumstances, to perform our professional duties cheerfully, promptly and faithfully, remembering the great responsibilities which rest upon us, and remembering that ours is (notwithstanding all the drawbacks) a noble profession—noble, though the remuneration be scant and our own hard services unthankfully received—noble, though many of us die in the harness, without wealth, without fame, without friends—noble, though we may

"Go to the vile dust from whence we sprung,
Unwept, unhonored and unsung,"

—noble now, and forever glorious will be the Medical Pro-

fession There is honor, there is charity, there is philanthropy in it—there is self-sacrifice—there is generosity—there is true greatness in it!

Think of the man who spends his time, his energies, his talents, aye, his all, in ministering to the "ills which flesh is heir to;" in deeds of charity and acts of philanthropy! Oh! there must be, there is a place of reward and rest for such a man; a place where "the wicked cease from troubling and the weary are at rest," where he shall hear the plaudit, "Well done good and faithful servant."

Now ladies and gentlemen, a word or two to you and we are done. The duties of the community to the worthy physician.

You know somewhat of our trials and vexations—you know of our lonely rides, our broken rest, our night watches and our disregard of self in our attendance to the sick and dying. You know of our devotion to the duties of our profession, and our relinquishment of all pleasures and recreations. You know that we have devoted our money, our time, our talents and our best energies to the elevation of the medical standard, to the increase of medical knowledge and to ministering to those of you who are prostrated by the hand of disease.

Statistics, which do not misrepresent, will tell you, too, that the whole profession are martyrs to the cause of suffering humanity, because statistics show that the average duration of the lives of physicians is shorter than that of any other class of men.

In view of these things we can the better approach this branch of our subject: Your duties to us.

There are mutual obligations between us, and in proportion as we are faithful, so should you reciprocate faithfully.

In the first place, then, it is your bounden duty to sustain the honorable, regular physician by your prayers, your courtesies, your good words of encouragement and recom-

mendation, your heartfelt sympathies, and last, but not least of all, by your *money* also.

It is your duty to ignore as utterly unworthy, the outside and openly avowed empiric, and to discountenance with *supreme contempt* of all, the regularly graduated quack—the "viper that creeps where man disdains to climb"—creeps to position by lending his aid to quackery; creeps by underbidding his more honorable rival; creeps by nods, by winks, by little insinuations, by small innendoes, and by open assertions; creeps by standing upon the corners of the streets proclaiming his own great achievements—"blowing his own horn." Aye, I see you know the man to whom I refer—the poor man whose honor and whose honesty is more feeble than his intellect. He is a miserably, *dirty, frog-blooded reptile*, and merits nothing but the *scorn* and *ineffable contempt* of every true and honest gentleman of our profession, because just such mountebanks as he, under the *garb* of a diploma, do the cause of medicine more real damage than it receives from all other causes combined. Your duty is to pass him by and sustain his more honorable and worthy brother. We believe strongly in diplomas and think that every physician should have one, but they become contemptible when they serve no better purpose than to cloak empiricism and venality.

Your duty is to discriminate between the regular *worthy physician* and the *regularly unworthy quack*, diploma or no diploma.

In the streets of Philadelphia I once heard an out-and-out quack, whose nostrums some of you, perhaps, have taken, say, "I know my remedies will not accomplish what I say of them, but the world will be humbugged and I might as well humbug it as any other man." What a reflection was this upon the intelligence of the people! And yet respectable persons—persons of education and high position in society, like the ostrich of the desert, which sticks his head

under the sand for refuge and feels secure, so they stick their heads under some patent-right medicine and feel as safe from harm as the poor ostrich does under the bank of sand. They will persist in gulping down "Wine of Tar," "Vinegar Bitters," "Cherry Pectoral," "Koskoo," and a host of other poisonous nostrums.

If any of you have been guilty of a like sin, your duty is to throw such physic to the dogs, thank the Lord that you are still "the monuments of his sparing mercy," thank him for your *miraculous* escape, ask forgiveness, and promise upon bended knees never to be guilty of such supreme folly again.

Your duty is to patronize and support only the thoroughly qualified and truly honorable physicians, for you all must know that the remedies prescribed by such are sanctioned and found reliable by the teachings and experience of the most profound scholars and teachers in medicine now living or who have lived during the ages of the past. Then why will sensible people stultify themselves by swallowing patent pills and powders which are utterly unreliable, and are only gotten up as money traps to catch the unwary and feeble-minded, though they may be recommended by the certificates of all the *quack doctors*, *jack-legged lawyers* and *one-horse preachers* in the country!

Your duty to yourself and your doctor is to quit such madness and to come to him for aid and counsel in all matters of disease, unless, forsooth, you can get all the advice you may desire from that encyclopedia of medicine—the "*Rosadalis Almanac*" and other such *able* medical productions!

You should by all means encourage the State Medical Society and the State Medical Board, whose sole object and aim is now and will always be to elevate the profession of medicine in the State, both for their own advancement in medical science and for your protection and well-being.

You should require a high grade of accomplishments before you intrust your own lives and those of your families in the hands of any man; therefore, you must second us in our efforts to protect you, and never employ any man who has not first passed the State Medical Board.

After you have fulfilled all these duties, (I venture the assertion, though it may be an innovation to say so) your next obligation is to pay the poor Doctor for services rendered in rain, in snow, in sleet, by day and by night, and pay promptly, cheerfully and with a good grace, because physicians' wives must be clothed, physicians' children must be fed and educated, and (alas, for the frailty of human nature) occasionally the poor Doctor gets hungry himself!

It is not only a duty, but right-thinking men should esteem it a great privilege to pay the man who has been instrumental in their relief or recovery from severe disease, but too often is it the case that the physician is the last man paid, and when paid, paid so grudgingly that 'tis with more pain than pleasure he receives it. I heard a man say it was the hardest bill he ever had to pay, and yet that same individual who esteemed it hard to pay for services rendered his own sick child, would think it no hardship to pay his lawyer twenty-five, fifty, or even a hundred dollars to get him out of some paltry scrape.

These things ought not to be, and your duty is to cry out against them and refuse to associate with the man *who is able*, but will not pay his Doctor.

I as firmly believe it as I know that I am standing here to-night, that when we shall all appear before the great white throne of God to give an account of all the deeds done in the body, that many a poor man will realize for the first time the *full extent of his obligations* to his Doctor, and woe be unto him who has been a *delinquent* in this respect, for as there are cardinal virtues, so there are cardinal sins, and *this*, THIS is one of them!

We thank God that there are many honest, noble, charitable men and women in North Carolina, who think it right, and just, and a duty to pay the Doctor.

As the place of our nativity we love North Carolina more than any other place upon the habitable globe. It is to us the land of lands, the brightest, greenest, loveliest spot, round which our heartstrings love fondly to entwine themselves.

> "My mother kissed me here,
> My father pressed my hand."

We love her because we have dear ones living upon her genial, generous bosom, and because we have dear ones whose bones are mouldering under her sod.

We love her for her hillocks, her everlasting hills and lofty mountains.

We love her for her extensive forests of majestic oaks, stately pines, dark spreading cedars and flowering vines.

We love her for her limpid fountains, her perennial, murmuring streams, meandering brooklets and grand, leaping, rolling, rushing old rivers.

We love her for her ten thousand flowers of every pleasant odor and every varying hue, whose sweet perfume is borne to us in the breath of every passing zephyr which fans our cheeks.

We love her for her turtle dove's soft cooing notes, her mocking bird's wild warbling songs, and for her "cattle upon a thousand hills."

We love her because her men are the noblest, her children the sweetest and her women the fairest and loveliest that walk the face of God's green heritage.

Yes! yes, from the tobacco and wheat fields of the north to the corn and cotton plantations of the south; from the sea-girt shores of the east, where the billows of mighty ocean keep up their ceaseless song and spend their utmost fury, to the grand old mountains of the west, whose noble

summits pierce the clouds and tower in native grandeur and sublimity far above them.

In length and breadth, in height and depth, from centre to circumference, we love North Carolina, and among us Doctors there breathes not one

> "Man with soul so dead,
> Who never to himself hath said—
> This is my own, my native land!"

but we can endorse most heartily the words of her lamented son, and can say with him,

> "Carolina! Carolina! Heaven's blessings attend her,
> While we live we will cherish, and love, and defend her,
> Tho' the scorner may sneer at, and witling defame her,
> Our hearts swell with gladness whenever we name her."

Yet, alas! alas! there is one dark spot upon the fair escutcheon of North Carolina—a spot which, like Lady Macbeth's spot of blood, neither will all the perfumes of Arabia disguise it, nor will all the waters of the briny sea wash it out—a spot which, like some loathsome phlagedenic ulcer, is gnawing upon and eating out the fair name, the honor, and even the justice of our good old mother.

The dark spot which blemishes her beauty and hangs like some huge, lowering, murky cloud above her fair name, her honor and her justice, is the fact that she has never fully appreciated her worthy physicians, and has ever been too slow to help them; and although our legislators and others in authority may be doing what is just and right to cause this ulcer to granulate and heal over, still the hideous eschar will ever remain a lasting mark of the shame and disgrace of North Carolina in this particular.

Oh! what a withering commentary is it upon the land of schools and colleges; the land of poets, scholars, statesmen and orators; the land of gallant men and fair ladies. What a commentary to say that she does not appreciate her worthy physicians and does so little for their protection and advancement. 'Tis a *crying* and a *burning* shame, and we appeal to every one of you to-night who has any self-respect, any

sense of justice, or any State pride, to exert your influence against the evil, and never cease working until it is corrected.

Do you not know that many of the noblest sons of our profession have already gone to other fields of labor, and can you not see the cause?

Do you not know that a man cannot "climb the steep where fame's proud temple shines afar," with visions of half-clad wife and hungry babies?

Do you not know that the more highly you appreciate and cultivate the intelligence of your physician, the greater will be your own chances for good health, long life and prosperity? We know you do, for this city is supposed to be the centre of learning in the State—the fountain head from whence eminates the laws to which we sons of Hippocrates bow in loyal obedience.

"These are the walls that once echoed to the tread" of Gaston, Miller, Badger, Morehead, Ruffin, Gilliam, Swain and a legion of Carolina's proudest and most gifted sons. Therefore we know your intelligence and your power to aid and we appeal to you in behalf of our noble, self-sacrificing, but unappreciated profession. Help us, and in helping us, help yourselves—then will the poor, *down-trodden* physicians of the State raise their heads with the proudest in the land —then will they go forth to battle with the destroying angel with renewed life, renewed energy and a renewed determination to mount the most rugged steps up the hill of medical science and renown—then will you be proud of the physicians of North Carolina.

Do your duties faithfully by us and we promise to be faithful to you until our "spirits return unto God who gave them, and our bodies become food for worms."

[APPENDIX D.]

REPORT OF A CASE OF VIOLENT CEREBRAL EXCITEMENT, RELIEVED BY BROMIDE OF POTASSIUM.

BY W. T. CHEATHAM, M. D

I would respectfully call the attention of the Society to a case of violent cerebral excitement, following congestion of the brain, which was promptly relieved by Bromide of Potassium.

March 9th, 11 o'clock P. M., I was called to see a little boy, aged 5 years, of previous good health and apparently vigorous constitution.

I learned from his mother that three days previously, he was unusually active and playful, exercising freely with a small wagon; getting very warm and wading into a pool of water, getting his feet and legs wet. The two following days he was languid, dull and listless, with want of appetite. On the morning of the 9th, had fever; was nervous; vomited freely; also complained of severe pain in the head. I found, him, however, in a state of stupor, with hot, dry skin; excessive heat about the head; throbbing of the carotid; tongue heavily coated, with the edges red; eyes injected; pupils contracted; bowels constipated; urine high colored and scanty; respiration heavy and accelerated; pulse 140. He had been delirious since the vomiting in the morning; would throw his hands to his head and complain of excruciating pain. I had him immersed in a warm bath up to his armpits for ten minutes; when taken out wiped dry, wrapt in a woolen blanket and put to bed.

Rx.

Calomel, grs. viii.
Ipecac, " ii.

In syrup; to be followed in two hours by castor oil, zii.

Had his hair trimmed closely and a cloth wet with cold water kept constantly applied to the head.

March 10th, 9 *A. M.* Visited him again. The purgative medicines had produced several free evacuations from the bowels; pulse 120; less heat of skin; delirium considerably moderated.

Rx.
Vini Antimonial, zi.
Spts. Etheris Nitrosi, zii.
Mx. Dose, twelve drops every two hours in water.

Applied ice to the head instead of water.

10 *o'clock*, *P. M.* Saw him again. Pulse 110; respiration free and easy; skin pleasant; during the day obtained refreshing sleep; no delirium since my morning visit; expressed a desire for food; was allowed chicken tea. Continued antimonial mixture; discontinued the application of ice to the head.

March 11th, 10 *o'clock A. M.* Saw him again. Found him sitting up in bed talking to his little brother; slept well during the night; pulse 100; tongue cleaning off rapidly; urine improved both as to quantity and quality; during the night had free evacuation from the bowels; no fever; desired nourishment, and was allowed arrow root prepared with milk and boiling water. Continued antimonial mixture, but ordered that it be given every three, instead of two hours.

I departed congratulating myself on the speedy recovery of my patient. But disappointment speedily followed my self-gratulations, for at 10 o'clock P. M., I was called in great haste to see my patient again, the messenger stating that the little fellow was dying. On my arrival, to my astonishment, I found him with furious delirium. Talking incessantly; screaming from fright; endeavoring to escape the pursuit of imaginary monsters; picking at the bed clothes; reaching after imaginary objects; occasionally, with great suddenness, would array himself for a combat with an imaginary enemy, or, perhaps, some of his attendants; assail-

ing them furiously; calling vociferously for help to kill the dog, bull or bear, as his perverted and frenzied imagination might dictate. It required unremitting attention on the part of his attendants to prevent his jumping from bed and making his escape from the room. His strength was surprising for one of his age, had he been in a state of health. Pulse 90; no heat of surface; head no warmer than natural; eyes wild and excited. I could not determine the condition of the pupils, owing to his excited condition. Tongue slightly coated. His mother informed me that slight delirium was manifest shortly after my departure in the morning, but did not assume such a frightful character until nightfall. Applied a blister to the occiput; administered Dover Powders, grs. v., the dose to be repeated in two hours if sleep was not induced. The first dose not having the desired effect, the second was given, with no better result. As I was absent his mother essayed to give him two teaspoonsful of paregoric.

March 12th, 8 *o'clock A. M.* Visited him again. Pulse 85; blister draws well. It was now five hours since the last opiate had been taken. There was no mitigation of the symptoms, his frenzy surpassing anything I had ever witnessed in any patient, regardless of age, sex or diseased condition.

Having used the Bromide of Potassium with telling effect in a case of delirium tremens, I determined to give it a trial. Prescribed it in ten grain doses, repeated every half hour. When the fifth dose had been taken a slight disposition to drowsiness was manifest and the delirium less vehement. In fifteen minutes after taking the sixth dose my patient ceased to talk and fell quietly asleep, sleeping twelve hours soundly. When he awoke his mental faculties were perfectly clear and undisturbed. His pulse had again risen to 100; was remarkably prostrated, unable to raise his head from the pillow without assistance; took nourishment and con-

tinued to have frequent short and refreshing sleep. He convalesced from this period without an untoward symptom, the pulse gradually falling to 80 in 48 hours.

I respectfully call your attention to the remarkably quiet condition of the circulation during this high state of excitement. At the commencement of the delirium, pulse 100, gradually falling to 85, during the most violent mental disturbance it was ever my lot to witness. On the restoration of the mental faculties to their normal condition, pulse again rose to 100, to return to 80 within 48 hours.

I report this case on the merits of the Bromide of Potassium as a remedy for controlling disorders of the nervous system; a remedy much in vogue, the merits of which are held in question by many of our most prominent medical men.

[APPENDIX E.]

GLIOMA OF THE RETINA.

BY WILLIS ALSTON, M. D., WARRENTON, N. C.

The little patient of whom this case was reported, was born December 31st, 1866. He was of a fair complexion and very delicate constitution. At 3 months of age there was noticed dilatation of the pupil and a bright glistening spot in the posterior chamber of the left eye, unattended by any pain or symptoms of inflammation. This "spot" at first did not seem larger than a mustard seed or the head of a large pin, and could only be detected when the light shone in it in such a way as to show the "yellow reflex" from the bottom of the eye; in other respects, the eye at this time seemed perfectly good. After the patient had reached the age of five or probably ten months, it seemed to enter into

a process of development, increasing in extent and prominence, thus gradually protruding into the vitreous humor. Virchow says that when it enlarges sufficiently to protrude into the vitreous humor, it assumes the form of "a white nodulated mass," and that "its increase is partly due to the growth of the original mass and partly to the formation of new foci of disease in its vicinity, and hence, on becoming larger, the growth assumes a lobulated appearance."

When he became fifteen (15) months of age it was so perceptible as to be noticed by all who saw him. Still there seemed to be no other defect about the eye, vision, of course, being all the while lost. This condition of things gave the child no pain nor showed any signs of *inflammation*; indeed, Von Graefe's views are against Glioma being due to an "inflammatory Hyperplasia," and he supposes, further, that those who have supported that theory have been misled by mistaking the "Siquelae of intraocular inflammations" for Elioneata, or that the incipient stage of the tumor has been totally disregarded, and the inflammatory complications which came on afterwards were taken for the origin of the disease. Nature seemed to stay the hand of the "fell destroyer" until April 1869, when the first signs of inflammation began to appear; this onset, however, produced a condition not more severe than an ordinary "sore eye," lasting for a week or two and then subsiding of its own accord. At the expiration of a month or two inflammatory symptoms would again set in, and as before, would finally subside "*sua sponte*." These invasions coming on towards the last with more frequency and of longer duration, until intra-ocular tension began to make itself more manifest, the ball swelling and finally protruding from its socket. There was such considerable tension as to cause the coats of the eye to give way and perforation of the cornea to result. After the tumor had burst from its bony shell, its growth became very rapid. The eyelids, with this

"huge fungus" mass between them, became swollen and much erected, and considerably excoriated from the discharge which ran from this "red, fleshy and vascular" looking mass. The discharge was of a sanious character and formed incrustations upon the surface of the tumor, which, when removed, would cause blood to ooze pretty freely from the raw surface. As the case was not seen by me until after its incipient stage was over, no ophthalmoscopic examination was made. Consequently the internal appearance of the eye was entirely lost to view. From a description of the "glistening spot" by the parents of the child, it resembled very much, and indeed was the very condition called by the older authors "amaurotic cat's eye."

The case came under my observation about the last of February 1870, four weeks after the protrusion of the mass from the orbital socket, and presented the appearance shown in photograph No. 1,* and its external appearance is very well represented by the picture. As will be seen from photograph No. 2, the pendulous base, from ulceration of the cornea, is somewhat excavated, presenting ragged, fungoid-looking edges, from which small pieces would slough now and then. On pulsation the tumor felt hard and unyielding, except at the orifice, from which there was a discharge, around which the edges were soft and pulpy. At the time that I saw it, four weeks after the protrusion of the tumor, no treatment had been instituted excepting some adventitious plasters put on by the parents of the child. After a careful examination of the case, of the size and consistence of the tumor, state of general health, &c., I advised immediate extirpation of the entire mass. It may have, and indeed has been urged by some who vaguely term it "Cancer," that it is useless to extirpate, as the disease may

*The publisher being unable to obtain the necessary engravings in time, they are necessarily omitted in this publication.

recur and surely end in death. Is Glioma a malignant disease? Wells says that this question "is still considered doubtful by some observers." In the opinion of Von Graefe, the malignancy of such Gliomatous tumors "increases with the length of their existence and the increase of their development." "The propagation of the disease," says Wells, "occurs in two directions: 1st. Towards the choroid; 2d. To the *optic nerve*," and out of eight cases reported by Hirschberg, the *optic nerve* was implicated in six, and in most to a very considerable extent. Here lies the extreme danger of Retinal Glioma, in the extension of the disease from the optic nerve to the brain, developing, probably, a secondary tumor, or giving rise to inflammation of the brain. "Hence the the necessity," says Well, "of excising the eye at the earliest opportunity and dividing the optic nerve as far back as possible." Now, if according to Von Graefe (very high authority) the malignancy of these tumors increases with the length of their existence and increase of the development, is it not rational, therefore, to conclude that the longer these tumors remain unexcised the greater the danger of the increase of their malignancy and greater the chance for the optic nerve to become affected, and all its horrible consequences ensue. Hence early and entire extirpation ought to be resorted to. To this question Wells says, "*the rule* therefore is to remove the eye at the earliest possible period, so that there may be the chance of the optic nerve being still unaffected." And again he says, "But even when the tumor has burst through the coats of the eyeball and is fungating extensively, its removal is advisable, more especially if there is much pain and hemorrhage." There *was* much pain and hemorrhage in this case. And he even goes further and says, "It must be remembered that it is the only chance of prolonging life and of alleviating the dreadful suffering of the patient."

The patients, if no surgical means are instituted, usually

die in one of three ways: By hemorrhage, by extension of the tumor to the brain and its consequences, or by exhaustion. In this case of Congenital Glioma extirpation was prohibited by the parents and friends of the child, after admonitions, frequently repeated, of the dangers and untold sufferings incumbent upon delay, and the little sufferer gradually dragged out its existence, and died finally of *exhaustion* on the morning of the 9th of July, 1870.

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